

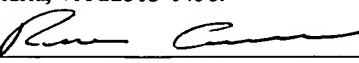
PTO Rec'd PCT/PTO 25 FEB 2005

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Date of Deposit: February 25, 2005

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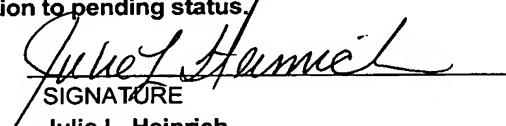
Name: Rene Campos

Signature: 

FORM PTO-1390 (Modified)  
U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE  
(REV 12-2004)

|  |  |   |
|--|--|---|
| <b>TRANSMITTAL LETTER TO THE UNITED STATES<br/>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br/>CONCERNING A FILING UNDER 35 U.S.C. 371</b>  |  | ATTORNEY'S DOCKET NUMBER<br><b>355901-0112</b><br>U.S. APPLICATION NO. (known) <b>11/525833</b><br>Not Yet Assigned |
| INTERNATIONAL APPLICATION NO.<br>PCT/FR2003/050042   | INTERNATIONAL FILING DATE<br>8/26/2003 | PRIORITY DATE CLAIMED<br>8/26/2002  |
| TITLE OF INVENTION<br>LINING SUPPORT AND METHOD OF SELECTIVELY LINING CONDUCTIVE PADS OF SAID SUPPORT  |  |   |
| APPLICANT(S) FOR DO/EO/US<br>BUREAU et al.   |  |   |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:  |  |   |
| <p>1. <input checked="" type="checkbox"/> This is a <b>FIRST</b> submission of items concerning a filing under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a filing under 35 U.S.C. 371.</p> <p>3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2))<br/><input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).<br/><input checked="" type="checkbox"/> has been communicated by the International Bureau.<br/><input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US)</p> <p>6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).<br/><input checked="" type="checkbox"/> is attached hereto.<br/><input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</p> <p>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))<br/><input type="checkbox"/> are attached hereto (required only if not transmitted by the International Bureau).<br/><input type="checkbox"/> have been communicated by the International Bureau.<br/><input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.<br/><input checked="" type="checkbox"/> have not been made and will not be made.</p> <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</p> <p>9. <input checked="" type="checkbox"/> An unexecuted oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).</p> <p>10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p> |  |   |
| Items 11 to 20 below concern other document(s) or information included:  |  |   |
| <p>11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input checked="" type="checkbox"/> A preliminary amendment.</p> <p>14. <input checked="" type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</p> <p>15. <input type="checkbox"/> A power of attorney and/or change of address letter.</p> <p>16. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 – 1.825</p> <p>17. <input checked="" type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).</p> <p>18. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</p> <p>19. <input checked="" type="checkbox"/> Other items or information: Transmittal of Formal Drawings; PCT Request ; Notification of Submission of Priority Document PCT/I/B/304; International Search Report</p>  |  |   |

DT01 Rec'd PCT/PTC 25 FEB 2005

| U.S. APPLICATION NO. (if known, see 37 CFR 1.6)   |                       | INTERNATIONAL APPLICATION NO.   |                        | ATTORNEY'S DOCKET NUMBER |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
|---|-----------------------|---|------------------------|--------------------------|---------|-------------------------------------|-----------------------|--------------|------------------------|--------|----|-------------------------------------|--------------------|----------|------------|-----------|--|-------------------------------------|---------------|----------|-------------|---------|--|---|--|--|-------------|----|---------|-------------------------------|--|--|--|------------|--|
| Not Yet Assigned<br>164525833   |                       | PCT/FR2003/050042   |                        | 355901-0112              |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| 21. <input checked="" type="checkbox"/> The following fees are submitted:   |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td>a) Basic national fee</td> <td>\$300.00</td> <td>\$</td> <td>300.00</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>b) Examination fee</td> <td>\$200.00</td> <td>\$</td> <td>200.00</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>c) Search fee</td> <td>\$500.00</td> <td>\$</td> <td>500.00</td> <td></td> </tr> <tr> <td colspan="3">TOTAL OF ABOVE CALCULATIONS =</td> <td>\$1000.00</td> <td>\$</td> <td>1000.00</td> </tr> </table>   |                       |   |                        |                          |         | <input checked="" type="checkbox"/> | a) Basic national fee | \$300.00     | \$                     | 300.00 |    | <input checked="" type="checkbox"/> | b) Examination fee | \$200.00 | \$         | 200.00    |  | <input checked="" type="checkbox"/> | c) Search fee | \$500.00 | \$          | 500.00  |  | TOTAL OF ABOVE CALCULATIONS =               |  |  | \$1000.00   | \$ | 1000.00 |                               |  |  |  |            |  |
| <input checked="" type="checkbox"/>   | a) Basic national fee | \$300.00  | \$                     | 300.00                   |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <input checked="" type="checkbox"/>   | b) Examination fee    | \$200.00  | \$                     | 200.00                   |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <input checked="" type="checkbox"/>   | c) Search fee         | \$500.00  | \$                     | 500.00                   |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| TOTAL OF ABOVE CALCULATIONS =   |                       |   | \$1000.00              | \$                       | 1000.00 |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$ for each additional 50 sheets of paper or fraction thereof.   |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| Total Sheets  | Extra sheets          | Number of each additional 50 or fraction thereof (round up to a whole number) |                        | RATE                     |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| 62 - 100 =  | 0 /50 =               | 0   |                        | x \$250.00               | \$ 0.00 |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e))   |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <table border="1"> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th colspan="2">RATE</th> <th>\$</th> </tr> <tr> <td>Total Claims</td> <td>31 - 20 =</td> <td>11</td> <td>x \$ 50.00</td> <td>\$ 550.00</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>2 - 3 =</td> <td>0</td> <td>x \$ 200.00</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td colspan="3">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td>+ \$ 360.00</td> <td>\$</td> <td></td> </tr> <tr> <td colspan="4">TOTAL OF ABOVE CALCULATIONS =</td> <td colspan="2">\$ 1680.00</td> </tr> </table>   |                       |   |                        |                          |         | CLAIMS                              | NUMBER FILED          | NUMBER EXTRA | RATE                   |        | \$ | Total Claims                        | 31 - 20 =          | 11       | x \$ 50.00 | \$ 550.00 |  | Independent Claims                  | 2 - 3 =       | 0        | x \$ 200.00 | \$ 0.00 |  | MULTIPLE DEPENDENT CLAIM(S) (if applicable) |  |  | + \$ 360.00 | \$ |         | TOTAL OF ABOVE CALCULATIONS = |  |  |  | \$ 1680.00 |  |
| CLAIMS  | NUMBER FILED          | NUMBER EXTRA  | RATE                   |                          | \$      |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| Total Claims  | 31 - 20 =             | 11  | x \$ 50.00             | \$ 550.00                |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| Independent Claims  | 2 - 3 =               | 0   | x \$ 200.00            | \$ 0.00                  |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable)   |                       |   | + \$ 360.00            | \$                       |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| TOTAL OF ABOVE CALCULATIONS =   |                       |   |                        | \$ 1680.00               |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½.  |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| SUBTOTAL = \$ 1680.00   |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| Processing fee of 130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f))  |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| TOTAL NATIONAL FEE = \$ 1680.00   |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). 40.00 per property  |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| TOTAL FEES ENCLOSED = \$ 1680.00  |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <table border="1"> <tr> <td colspan="3"></td> <td colspan="2">Amount to be refunded:</td> <td></td> </tr> <tr> <td colspan="3"></td> <td colspan="2">charged:</td> <td></td> </tr> </table>   |                       |   |                        |                          |         |                                     |                       |              | Amount to be refunded: |        |    |                                     |                    |          | charged:   |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
|   |                       |   | Amount to be refunded: |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
|   |                       |   | charged:               |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <p>a. <input checked="" type="checkbox"/> A check in the amount of \$1,680.00 to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. <u>50-0872</u> in the amount of _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>50-0872</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form.</b> Provide credit card information and authorization on PTO-2038.</p> <p><b>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</b></p> |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| SEND ALL CORRESPONDENCE TO:   |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |
| <p>Foley &amp; Lardner LLP<br/>Customer Number: 38706</p> <p><br/>         SIGNATURE<br/>         Julie L. Heinrich<br/>         NAME<br/>         48,070<br/>         REGISTRATION NUMBER       </p>   |                       |   |                        |                          |         |                                     |                       |              |                        |        |    |                                     |                    |          |            |           |  |                                     |               |          |             |         |  |   |  |  |             |    |         |                               |  |  |  |            |  |

**10/525833**

Atty. Dkt. No. 355901-0112

DT01 Rec'd PCT/PTC 25 FEB 2005

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: BUREAU et al.

Title: LINING SUPPORT AND  
METHOD OF SELECTIVELY  
LINING CONDUCTIVE PADS  
OF SAID SUPPORT

Appl. No.: Not Yet Assigned

Int'l. Filing Date: August 26, 2003

Examiner: Not Yet Assigned

Art Unit: Unknown

**CERTIFICATE OF EXPRESS MAILING**

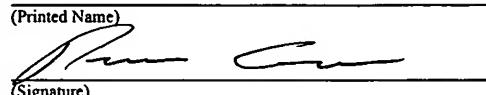
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

EV 576634228 Z-25-05

(Express Mail Label Number) (Date of Deposit)

Rene Campos

(Printed Name)

  
(Signature)

**TRANSMITTAL OF FORMAL DRAWINGS**

Mail Stop: PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

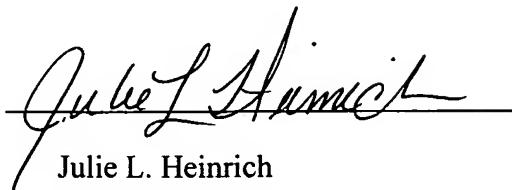
Transmitted herewith are the formal drawings (10 sheets, Figures 1A, 1B, 1C, 1D, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14A, 14B, 14C) for the above-identified application. The Official Draftsperson is respectfully requested to approve these drawings for entry into the application.

Respectfully submitted,

Date Feb 25, 2005

FOLEY & LARDNER LLP  
Customer Number: 38706  
Telephone: (650) 251-1105  
Facsimile: (650) 856-3710

By



Julie L. Heinrich  
Agent for Applicant  
Registration No. 48,070